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Application Number	10/573,133
Filing Date	January 12, 2007
First Named Inventor	Peter Dorff
Title	LIGANDS
Art Unit	N/A
Examiner Name	Not Yet Assigned
Attorney Docket No.	15652-04303-US

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint Practitioner(s) associated with the following Customer Number as my/lour attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

23416

OR

I hereby appoint Practitioner(s) named below as my/lour attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

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I am the:

Applicant/Inventor.

OR

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Feb 16, 2011

Name

David Gryte

Telephone

302-885-6609

Title and Company

Authorized Representative, AstraZeneca

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



*Total of 1 forms are submitted.